

# ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION SUBMISSION COVER SHEET

Important: USE A SEPARATE COVER sheet for each document.

ARE YOU FILING: ☐ New Entity ☐ Change to existing Entity ☐ Re submission/Correction

Please Select AND Complete all the Appropriate Sections 1 through 10:

Regarding (Name/Proposed name for Corp/LLC):

1. Type in Name: \_\_\_\_\_
2. Filing Type: (Select Only One)
  - ☐ Articles of Domestication .....\$100.00
  - ☐ Articles of Incorporation (P) .....\$ 60.00
  - ☐ Articles of Incorporation (NP).....\$ 40.00
  - ☐ Articles of Organization .....\$ 50.00
  - ☐ Application For Authority (Business).....\$175.00
  - ☐ Application to Conduct Affairs (NP).....\$175.00
  - ☐ Application for New Authority .....\$175.00
  - ☐ Application for Registration.....\$150.00
  - ☐ Articles of Amendment.....\$ 25.00
  - ☐ Articles of Amendment & Restatement .....\$ 25.00
  - ☐ Articles of Correction .....\$ 25.00
  - ☐ Articles of Merger/Share Exchange .....\$100.00
  - ☐ Articles of Merger LLC .....\$ 50.00
  - ☐ Affidavit of Publication.....No Fee
  - ☐ Other: \_\_\_\_\_
3. Extras:
  - ☐ Certified Copies ( ) (Qty @ \$5 each for Corps
  - ☐ Certified Copies ( ) (Qty @ \$10 each for LLC=s
  - ☐ Good Standing Certificate ( ) (Qty @ \$10 ea.)
  - ☐ Expedite Good Standing (\$35.00 extra)
  - ☐ Expedite Certified Copies (\$35.00 extra)
4. Processing Type (Select One)
  - ☐ **Expedited (\$35.00)** (Priority service, Additional Fee Per Document) Completed as soon as possible. View current processing times at <http://corporations.azcc.gov/>
  - ☐ **Regular** View current processing times at <http://corporations.azcc.gov/>
5. Select Payment type:
  - ☐ Check Amt \_\_\_\_\_ Check # \_\_\_\_\_
  - ☐ Cash Amt \_\_\_\_\_
  - ☐ MOD Amt \_\_\_\_\_ MOD # \_\_\_\_\_
  - ☐ No fee required
  - ☐ See attached distribution of funds instructions
6. Total Payment Type: \$ \_\_\_\_\_
7. Other Special Instructions: \_\_\_\_\_
8. SELECT ONE RETURN DELIVERY OPTION : ☐ Mail ☐ Pick Up ☐ Fax # \_\_\_\_\_
9. The following individual should be called to pick up completed documents:
 

Name/Service Co/Preparer: \_\_\_\_\_ Phone: \_\_\_\_\_

Preparer License # \_\_\_\_\_

(If applicable)
10. Please respond promptly to phone messages. Documents will be mailed if they are not picked up in a timely manner - approximately two weeks. In that event, the documents should be mailed to the following address:
 

Firm Name: \_\_\_\_\_ Attn: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

**Pick-up by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**(FOR ACC USE ONLY. Do not fill in this box)**